

10/28/03 14:14 FAX 13193957250

KINKOS CR

003

Docket No.: CDR-02-011

DECLARATION AND POWER OF ATTORNEY FOR UTILITY PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, mailing address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND SYSTEM FOR PROVIDING COMMUNICATION SERVICES FOR HEARING- IMPAIRED PARTIES

the specification of which

☒ is attached hereto

☐ was filed on _____ as United States Application Number _____ or PCT International Application Number _____ and was amended on _____

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national application or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. § 119 (a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

Priority Claimed

(number) (country) (date filed)

yes no

(number) (country) (date filed)

yes no

I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below.

(Application Number(s))

(Filing Date mm/dd/yy)

10/28/03 14:15 FAX 13193957250

KINKOS CR

004

Docket No.: CDR-02-011

I hereby appoint practitioners at Customer No. 25537 which include: Steven McCann, Reg. No. 34,958; Paul A. Roberts, Reg. No. 40,289; Suresh Koshy, Reg. No. 42,761; Stephen A. Zemanick, Reg. 48,724; David J. O'Neill, Reg. 42,953; and Michael A. Wrenn, Reg. No. 42,237, as attorneys; and, Frank A. McKiel, Reg. No. 43,792, and Eden U.I. Stright, Reg. No. 51,205, as patent agents with full power of substitution and revocation, to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith, of whom I acknowledge as legal representatives of the Assignee acting on the Assignee's behalf.

Send correspondence to:

Customer Number: 25537

WORLDCOM, Inc.

Technology Law Department

1133 19th ST, NW

WASHINGTON, DC 20036

Direct Telephone Calls To:

(202) 756-6604

I hereby declare that all statements made herein of my knowledge are true and that all statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of Sole or First Inventor: James O. Smith, Jr.

Residence Address: Marion, IA, USA

Mailing Address: 1055 18th St., Marion IA 52302 USA

Citizenship: USA

Signature:  Date: 10/28/03

Full name of Additional Joint Inventor, if any:

William A. McClelland

Residence Address: Cedar Rapids, IA, USA

Mailing Address: 2201 5th Ave. SE, Cedar Rapids, IA 52403-4206, USA

Citizenship: USA

Signature: _____

Date: _____

Full name of Additional Joint Inventor, if any: Chris R. Heidelbauer

Residence Address: Marion, IA 52302, USA

Mailing Address: 3235 5th Street, Marion, IA 52302, USA

Citizenship: USA

Signature: _____

Date: _____

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Full name of Sole or First Inventor: James O. Smith, Jr.
Residence Address: Marion, IA, USA
Mailing Address: 1055 18th St., Marion IA 52302 USA
Citizenship: USA

Signature: _____ Date: _____

Full name of Additional Joint Inventor, if any: William A. McClelland
Residence Address: Cedar Rapids, IA, USA
Mailing Address: 2201 5th Ave. SE, Cedar Rapids, IA 52403-4206, USA
Citizenship: USA

Signature: William A. McClelland Date: 11/03/2003

Full name of Additional Joint Inventor, if any: Chris R. Heidelbauer
Residence Address: Marion, IA 52302, USA
Mailing Address: 3255 5th Street, Marion, IA 52302, USA
Citizenship: USA

Signature: Chris R. Heidelbauer Date: 11/03/2003